

MAIL TO:
Office of the Attorney General
Registry of Charitable Trusts
P.O. Box 903447
Sacramento, CA 94203-4470

COMMERCIAL FUNDRAISER FOR CHARITABLE PURPOSES

VEHICLE DONATION PROGRAM

ANNUAL FINANCIAL REPORT FOR 20_____

(California Government Code section 12599)
(11 Cal. Code Regs. section 308)

Failure to file annual financial report by January 30th annually for each calendar year of solicitation may result in late fees as defined in Government Code section 12586.1.

An annual financial report must be filed for each event for each charity solicited for during the previous calendar year.



STREET ADDRESS:
1300 I Street
Sacramento, CA 95814
Telephone: (916) 323-5079

WEBSITE ADDRESS:
<http://ag.ca.gov/charities/>

Name and Address of Commercial Fundraiser for Charitable Purposes:

CF No. _____

Name of commercial fundraiser for charitable purposes

Address of commercial fundraiser for charitable purposes

City, State, and ZIP code of commercial fundraiser for charitable purposes

Name and Address of Charitable Organization:

CT No. _____ F.E.I.N. _____

Name of charity

Address of charity

City, State, and ZIP code of charity

Figures from (check one): National Campaign ☐ California Campaign ☐

_____ held (on) (from) _____ 20_____, to _____ 20_____
(Type of Activity) (Date or dates must be shown)

1. REVENUE

A. Car/Truck Sales

_____ A.

B. Boat Sales

_____ B.

C. Other sources: (Specify)

a. _____

_____ Ca.

b. _____

_____ Cb.

c. _____

_____ Cc.

d. _____

_____ Cd.

D. TOTAL REVENUE

_____ D.

2. EXPENSES

A. Fees or commissions paid by commercial fundraiser for charitable purposes

_____ A.

B. Salaries

_____ B.

C. Payroll taxes

_____ C.

D. Employee benefits

_____ D.

E. Towing

_____ E.

F. Vehicle repairs

_____ F.

G. Parts

_____ G.

H. DMV Fees

_____ H.

I. Appraisals

_____ I.

J. Detailing

_____ J.

K. Advertising

_____ K.

L. Telephone

_____ L.

M. Other expenses: (Specify)

a. _____

_____ Ma.

b. _____

_____ Mb.

c. _____

_____ Mc.

d. _____

_____ Md.

N. TOTAL EXPENSES

_____ N.

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Page 2

3. Distribution or net to charitable organization _____ 3.
4. Less additional expenses relating to operation of vehicle donation program paid by charity _____ 4.
5. Total amount charity realized from operation of vehicle donation program _____ 5.
6. (a) Is any director, officer, or employee of the commercial fundraiser for charitable purposes a director, officer, or employee of the charitable organization listed in this report?

☐ Yes ☐ No If "yes," complete the following:

Name and address of director, officer or employee of commercial fundraiser for charitable purposes	Name and address of charitable organization	Relationship of director, officer, or employee to charitable organization

(b) For each affiliation identified in 6(a), attach copy of the contract between the commercial fundraiser for charitable purposes and the charity.

Under penalties of perjury, I declare that I have examined this report, including accompanying documents, schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete.

Signature of authorized officer (commercial fundraiser for charitable purposes)

Printed name

Title

Date

This report must be signed by two officers or directors of the charitable organization for verification.

Signature of authorized officer/director (charity)

Printed name

Title

Date

Signature of authorized officer/director (charity)

Printed name

Title

Date